

Health Home Partner Marketing Guidelines

Health Homes are an important set of services available to Medicaid members with serious mental illness and should work diligently to engage assigned members so that care among various providers can be well-coordinated and chronic conditions can be well-managed. To engage some SMI Health Home members it will be necessary to send mailings and offer low-cost incentives to encourage members to visit the Health Home or meet with Health Home staff. Federal Medicaid regulations allow these sorts of contacts with members who have been assigned to specific Health Homes.

Health Homes may also share information about Health Homes and their benefits with non-enrolled members as long as the information is general in nature and distributed to the entire group of consumers served by the specific Health Home agency.

Federal regulation (42 CFR 438.104) prohibit “any communication, from an MCO, PIHP, PAHP, or PCCM to a Medicaid beneficiary who is not enrolled in that entity, that can reasonably be interpreted as intended to influence the beneficiary to enroll in that particular MCO’s, PIHP’s, PAHP’s or PCCM’s Medicaid product.”¹ Health Homes, while not mentioned specifically in the regulation, serve similar functions as the other entities mentioned and should refrain from both marketing to non-members, as well as exerting any undue influence or coercion when talking with Medicaid beneficiaries they serve in other ways.

KDHE expects Health Home staff to adhere to these standards. KDHE also expects the KanCare MCOs to help their contracted Health Home Partners (HHPs) understand and adhere to these standards.

¹ PIHP- Prepaid Inpatient Health Plan; PAHP - Prepaid Ambulatory Health Plan; PCCM – Primary Care Case Manager